

(1)

UNITED STATES DISTRICT COURT
SOUTHERN DISTRICT OF NEW YORK

SEP 24 2020

Paul J Delorenzo Jr pro SE

Write the full name of each plaintiff.

No. _____
(To be filled out by Clerk's Office)

-against-

Sullivan County Jail Administration,
Mental Health Adminstration,
Health Care Services Administration

COMPLAINT
(Prisoner)

Do you want a jury trial?
 Yes No

Write the full name of each defendant. If you cannot fit the names of all of the defendants in the space provided, please write "see attached" in the space above and attach an additional sheet of paper with the full list of names. The names listed above must be identical to those contained in Section IV.

NOTICE

The public can access electronic court files. For privacy and security reasons, papers filed with the court should therefore *not* contain: an individual's full social security number or full birth date; the full name of a person known to be a minor; or a complete financial account number. A filing may include *only*: the last four digits of a social security number; the year of an individual's birth; a minor's initials; and the last four digits of a financial account number. See Federal Rule of Civil Procedure 5.2.

(2)

I. LEGAL BASIS FOR CLAIM

State below the federal legal basis for your claim, if known. This form is designed primarily for prisoners challenging the constitutionality of their conditions of confinement; those claims are often brought under 42 U.S.C. § 1983 (against state, county, or municipal defendants) or in a "Bivens" action (against federal defendants).

Violation of my federal constitutional rights

Other: Title 28 CFR 35.104(a)(2)(ii)(2016) Title II of ADA Section 504

II. PLAINTIFF INFORMATION

Each plaintiff must provide the following information. Attach additional pages if necessary.

<u>Paul</u> First Name	<u>J</u> Middle Initial	<u>Delorenzo</u> Last Name	<u>JR</u>
<u>None</u>			

State any other names (or different forms of your name) you have ever used, including any name you have used in previously filing a lawsuit.

2020082-00772

Prisoner ID # (if you have previously been in another agency's custody, please specify each agency and the ID number (such as your DIN or NYSID) under which you were held)

Sullivan County Jail
Current Place of Detention

58 Old St R#17

Institutional Address

<u>Sullivan</u> County, City	<u>Monticello</u> , State	<u>New York</u>	<u>12701</u> Zip Code
---------------------------------	------------------------------	-----------------	--------------------------

III. PRISONER STATUS

Indicate below whether you are a prisoner or other confined person:

- Pretrial detainee
- Civilly committed detainee
- Immigration detainee
- Convicted and sentenced prisoner
- Other: _____

(3)

IV. DEFENDANT INFORMATION

To the best of your ability, provide the following information for each defendant. If the correct information is not provided, it could delay or prevent service of the complaint on the defendant. Make sure that the defendants listed below are identical to those listed in the caption. Attach additional pages as necessary.

Defendant 1:

<u>Mike</u>	<u>Schiff</u>	<u>Sheriff</u>
First Name	Last Name	Shield #

Sheriff of Sullivan County

Current Job Title (or other identifying information)

58 Old Rt 17

Current Work Address

<u>Sullivan</u>	<u>Monticello</u>	<u>Ny</u>	<u>12701</u>
County, City		State	Zip Code

Defendant 2:

<u>Eric</u>	<u>Chaboty</u>	<u>Under Sheriff</u>
First Name	Last Name	Shield #

Under Sheriff of Sullivan County

Current Job Title (or other identifying information)

58 Old Rt 17

Current Work Address

<u>Sullivan</u>	<u>Monticello</u>	<u>Ny</u>	<u>12701</u>
County, City		State	Zip Code

Defendant 3:

<u>Herald</u>	<u>Smith</u>	<u>Cheif</u>
First Name	Last Name	Shield #

Jail Administrator

Current Job Title (or other identifying information)

58 Old 17

Current Work Address

<u>Sullivan</u>	<u>Monticello</u>	<u>Ny</u>	<u>12701</u>
County, City		State	Zip Code

Defendant 4:

<u>James</u>	<u>Ginty</u>	<u>Caption</u>
First Name	Last Name	Shield #

Caption of Sullivan County Jail

Current Job Title (or other identifying information)

58 Old 17

Current Work Address

<u>Sullivan</u>	<u>Monticello</u>	<u>Ny</u>	<u>12701</u>
County, City		State	Zip Code

(9)

Sept 24 2020

PG 3-A

Christopher Bini

Lt

Urgent

Lt of Sullivan County Jail

58 old #7

Sullivan County Jail Monticello NY 12701

MEDICAL STAFF

DR. Weiss

Charge Dr.

DR. in Charge at Sullivan County Jail

Lynn Wilcox

Head Nurse

Medical Administrator At Sullivan County Jail

DR. Mirza

Psychiatrist

Facility Psychiatrist At Sullivan County Jail

Wendy Moore

Nurse

Nurse At Sullivan County Jail

(5)

PG 3-b Jennie Norris Social Worker

Mental Health Social Worker Sullivan County jail

All Work Sullivan County Jail

58 Old 17

Sullivan Monticello Ny 12701

CO Taylor #

Kotic Slater

(6)

V. STATEMENT OF CLAIM

Place(s) of occurrence: Apod Cell 1 Sullivan County Jail

Date(s) of occurrence: Aug 1-2-3 / Aug 7 -18 2020

FACTS:

State here briefly the FACTS that support your case. Describe what happened, how you were harmed, and how each defendant was personally involved in the alleged wrongful actions. Attach additional pages as necessary.

Due to my current information and ~~believe~~ beliefs, understanding of the law everything + futher state is true to the best of my knowledge.

On July 27 2020 during the Facility Booking process I, told CO Taylor that I Suffer from Seizures & N Mental Health problems, due to A T.B.I and Suffer 37% loss of Cognitive functions.

Later that day I was Screened by Medical Staff Katie Slater, Again told her the same thing and Meds I was on ~~Alprazolam~~ Klonopin - Anti Seizure, panic attack eat, Addrell, OCycladin for pain due to an Accident, I Have Seizures not cause of A neurological disorder, but due to damage to my brain (Neuron mis Firing)

for 6 days I was denied Meds for my Seizures and On Aug 1 suffered a Seizure and was rushed to the Hospital At that point A hospital DR prescribed me Keppra. After 6 hours I was brought back to jail where I still was not seen by Facility DR. Weiss

After 8 day of mental torment or have not been given Mental health Meds I was Seen by DR. Mirza jail Psychiatrist. V.i.a CAN RA, got into an Argument, Cause she didn't understand How I explained my Current Mental State

(7)

PF-4-A

And t tried to explain my current meds She cut me off told me t was lying t got mad lost my calm and walked out

On Aug 7 2020 After 12 days of being locked in a Cell With No Medical/mental health. I wrote Medical staff Wendy Moore A letter pleading for help that this prolonged delay in Adequate mental health, there for causing A deliberate indifference to my medical needs. t Such letter stated above t please for help that the Voices "Were getting louder" And due to my personal disability And Not being on my Medication the only way to Subdue the Voices is by acts of Violence, or Harm to my Self (punching walls, Kicking doors pulling hair ect) t n no way did t threaten my self or Any one else, t just said this could happen.

So, instead of medical help t was placed on 1 on 1 Stripped of my Clothing and deprived of Human contact in Solitary Confinement¹ While Still Not being Seen by A DR was detained for 11 days Aug 7 2020 - Aug 18, 2020. On Aug 13, t was finally Seen by DR. MIRZA And ^{ASB#} put on ~~both sides~~ effects cause seizures (and since had a seizure) During my 11 day confinement t was not Seen After 72 hours by ~~psychiatrist~~ or there after.

I'd also like to ~~also~~ note that t wrote to jail Admin on Aug 3 Had it Notarized Sent also to Judge Conn D.A. Galligan Supreme court judge ferrel of Sullivan County Pleading for Help

Due in fact that Sullivan County jail failed in protecting me from Serious physical harm and helped deteriorate my Mental

(8)

PG-4-B

Well being I do to my understanding of New York State law that Sullivan County Jail Admin + Medical Staff listed did show deliberate indifference to my personal disability (Seizures) And in doing so CAUSE "the immediate threat of imminent danger to Serious physical injury" by this deliberate delay to my medical needs do so caused "Serious physical injury" (Seizures). And by Medical Staff Not Understanding my medical needs is still do so by giving me medication that side effects those seizures is in Violation of 8 Amend 14 equal protection clause

Also to the best of my knowledge and understanding that Sullivan County jail mental health department deliberate indifference to my personal mental disability and gave cruel delay in providing me mental health medication, and the first I am disabled ~~do~~ to my t.o.t is a violation of title 28 CFR 35.104(c)(2)(6) title II of A.D.A. Section 504, And 8,14 Amendment to my understanding

I AM ALSO STATING ON THIS RECORD THAT MANY ATTEMPS TO ATTAIN LEGAL DOCUMENTATION TO FURTHER MY PROSE ARGUMENTS ARE FRAGILE AT MOST. CAUSE WHAT I REQUEST IS NOT NYSMS AND CAN NOT BE OBTAINED BY WAY OF LEXIS NEXIS, IN AS MUCH THIS COURT KNOW I'M FILING "IN FORMA PAUPERIS" SO I DO NOT HAVE MONEY TO GET LEGAL RESEARCH BY WAY OF MAIL.

Also I state by the Sullivan County Jail not affording me my requested materials I've been deprived of filing this claim with the great federal court of white plains and is my understanding that is a violation of due process

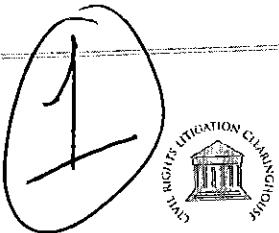
And to also add that since the 13,2020 day I've not

(9)

pg4C DR Mirza but only the Social Worker Jennifer Narcis
3-4 time due to the fact She's too busy to see everyone
due to my understanding the Medical Nurses who work here
(Not 24 hrs) Are not trained mental health Nurses which is
considered "gross staffing deficiencies" Which further my argument
or deliberate indifference on Sullivan County jail. As there repeated
failure to provide adequate mental health care. Due to the fact
the Sullivan County jail does not have full time physc DR
Nor 24 Hours psychiatric care is "grossly ^{Inadequate} Deliberate psychiatric care"
is another finding for deliberate indifference.

I can go on for pages but I feel with this last
Statement and due to my disability that I've Undoubtedly Stated
my claims every day due to the gross inadequacy of the mental
health or lack of staffing & treatment I live in fear that I
may suffer a break down, And have it mistook as acts of
aggression ^{and} be hurt by staff lock in confinement deprived
of proper medical/mental health. Due to the fact there not even
Over Night Medical No less Mental Health Staff. If I suffer
A episode in the middle of the night, there's not even a Help/call
button in the cells provided for mentally ill inmates!

I also provide evidence of such neglect
See attached 1-5 I'd have provided more but in
Sullivan County jail we are only allowed the minimum by law
and no more.



(P)

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CASE PROFILE

Case Name **Disability Advocates, Inc. [DAI] v. New York State Office of Mental Health**

PC-NY-0048

Docket / Court 1:02-cv-04002-GEL (S.D.N.Y.)

State/Territory New York

Case Type(s) Disability Rights-Pub. Accom.
Prison Conditions

Special Collection Solitary confinement

Attorney Organization Legal Services/Legal Aid
Prisoners' Legal Services of New York (PLSNY)

Case Summary On May 28, 2002, Disability Advocates, Inc., along with other public interest groups, filed a civil rights lawsuit pursuant to 42 U.S.C. § 1983 in the U.S. District Court for the Southern District of New York on behalf of state prisoners with mental illness. The complaint alleged that the New York State Office of Mental Health [OMH] and the New York State Department of Correctional Services [DOCS] were deliberately indifferent to the serious mental health needs of state prisoners with mental illness, in violation of the Eighth Amendment, the Americans with Disabilities Act (ADA) and the Rehabilitation Act. Specifically, plaintiff alleged that a cycle of torment existed within the New York state prison system: a lack of adequate mental health care resulted in the placement of prisoners with mental illness in isolated confinement, which in turn caused greater psychiatric harm to those prisoners. Plaintiff sought declaratory and injunctive relief.

Defendants filed a motion to transfer the case which was denied by the District Court (Judge Gerard E. Lynch) on October 31, 2002. Thereafter, the parties conducted discovery through 2006.

In April 2007, the parties reached a settlement, which Judge Lynch approved on April 27, 2007. The settlement requires that prisoners with serious mental illness confined in Special Housing Units ("SHU") will now receive a minimum of 2 hours per day of out-of-cell treatment and that prisoners in the RMHU receive as many as 4 hours, in addition to an hour of recreation.

The settlement also provides:

- Multiple reviews of disciplinary sentences for prisoners with mental illness for the purpose of removing prisoners with serious mental illness from isolated confinement.
- Residential programs for 405 prisoners with serious mental illness.
- 215 Transitional Intermediate Care Program beds for prisoners with mental illness in general population.
- 90 additional Intermediate Care Program beds for prisoners with mental illness who cannot tolerate the prison general population.
- A 100 bed Residential Mental Health Unit ("RMHU") which will provide 4 hours per day of out-of-cell programming for prisoners with serious mental illness who would otherwise be in SHU.
- The above are in addition to 310 residential mental health programs beds which the state instituted after the litigation commenced.
- An additional 20 psychiatric hospital beds for prisoners in need of acute care.
- Universal and improved mental health screening of all prisoners at admission to prison.
- Improved suicide prevention assessments, now required upon admission to SHU.
- Improved treatment and conditions for prisoners in psychiatric crisis in observation cells.
- Limits on the use of observation cells, where prisoners in psychiatric crisis are deprived of most possessions and clothing.
- Limits on punishment of prisoners with mental illness who hurt themselves because of their illness.
- Limits on the use of the punitive 'restricted diet' (a loaf made from bread and cabbage) as a punishment for misconduct by prisoners with serious mental illness.

- Elimination of isolated confinement of prisoners with serious mental illness in cells that have solid steel doors that severely isolate and restrict communication.

1-A

The new state budget provides monies to carry out the State's commitments in the settlement agreement. These funds approximate over \$50 million in capital construction costs; \$2 million for additional OMH staffing for the 2007-2008 year to grow to \$9 million when construction is complete; and nearly \$2 million for additional DOCS staffing for the 2007-2008 fiscal year.

(1)

Dan Dalton - 04/18/2007
Andrew Junker - 10/22/2014

compress summary

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Issues and Causes of Action

Issues	Affected Gender
	Female
	Male
Constitutional Clause	
	Cruel and Unusual Punishment
	Due Process
	Equal Protection
Defendant-type	
	Corrections
	Jurisdiction-wide
General	
	Conditions of confinement
	Disciplinary procedures
	Disciplinary segregation
	Solitary confinement/Supermax (conditions or process)
Medical/Mental Health	
	Mental health care, general
	Self-injurious behaviors
Mental Disability	
	Mental Illness, Unspecified
Plaintiff Type	
	Private Plaintiff
Type of Facility	
	Government-run
Causes of Action	42 U.S.C. § 1983 Americans with Disabilities Act (ADA), 42 U.S.C. §§ 12111 et seq. Section 504 (Rehabilitation Act), 29 U.S.C. § 701

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Case Details

Defendant(s)	New York State Dept. of Correctional Services New York State Office of Mental Health
Plaintiff Description	A New York protection and advocacy agency suing on behalf of prisoners with mental illness in New York State
Indexed Lawyer Organizations	Legal Services/Legal Aid Prisoners' Legal Services of New York (PLSNY)
Class action status sought	No
Class action status	No

granted
 Filed Pro Se No
 Prevailing Party Plaintiff
 Public Int. Lawyer Yes
 Nature of Relief Injunction / Injunctive-like Settlement
 Source of Relief Settlement
 Form of Settlement Court Approved Settlement or Consent Decree
 Order Duration 2007 - n/a
 Filed 05/28/2002
 Case Closing Year 2007
 Case Ongoing Perhaps, but long-dormant

(12)

Documents[click to show/hide detail](#)

Docket(s) **1:02-cv-04002-GEL (S.D.N.Y.)**
[PC-NY-0048-9000.pdf | Detail](#)

[Save Doc](#)

Date: 10/05/2007
 Source: PACER [Public Access to Court Electronic Records]

General Documents[Save Doc](#)**Complaint**

[PC-NY-0048-0001.pdf | Detail](#)
 Date: 05/28/2002

[Save Doc](#)**Report of Plaintiff's Expert Steve J. Martin**

[PC-NY-0048-0003.pdf | Detail](#)
 Date: 06/01/2005

[Save Doc](#)

Source: Plaintiffs' counsel

Report of Plaintiffs' Expert, Dr. Terry Kupers, MD (PART I; PART II FOLLOWS)

[PC-NY-0048-0004.pdf | Detail](#)
 Date: 06/01/2005

[Save Doc](#)

Source: Plaintiffs' counsel

Report of Plaintiffs' Expert, Dr. Terry Kupers, MD (PART II; PART I PRECEDES THIS)

[PC-NY-0048-0005.pdf | Detail](#)
 Date: 06/01/2005

[Save Doc](#)

Source: Plaintiffs' counsel

Private Settlement Agreement

[PC-NY-0048-0002.pdf | Detail](#)
 Date: 04/25/2007

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Judges Lynch, Gerard E. (S.D.N.Y., Second Circuit)

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Plaintiff's Lawyers Benkard, James W.B (New York)
 Boston, John (New York)
 Ginsberg, Betsy R. (New York)
 Greenberg, Daniel L. (New York)
 Johnson, Alba Susan (New York)
 Kerr, Sarah (New York)
 Lasky, Brian N. (New York)
 Loewenstein, Nina (New York)
 Rearden, Jennifer H. (New York)
 Sterling, Elizabeth [Betsy] C. (New York)
 Terrizzi, Thomas (New York)
 Zucker, Cliff (New York)

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Defendant's Lawyers Adlerstein, Lee A. (New York)
 Brewster, Richard W. (New York)
 Cohen, Leonard Arthur (New York)

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Cuomo, Andrew M. (New York)
Knudsen, John E. (New York)

Other Lawyers Martin, Steve J. (Texas)

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② SULLIVAN COUNTY SHERIFF'S OFFICE

(14)

MEMORANDUM

August 19, 2020

To: Delorenzo, Paul 20-0182
From: Lieutenant Christopher R. Bini ②
Subject: GRIEVANCE 20-473

Grievant advises that upon admission to this facility he notified security staff and medical staff that he suffers from seizures and that he takes medication for it. Grievant further states that he advised staff he wasn't feeling well and might have a seizure. Grievant makes the complaint that after notifying medical he wasn't given any seizure medication and this led to him having a seizure.

Chief Administrative Officer Response:

Upon entry grievant was booked and during the booking process grievant was asked if he was on any medications, grievant supplied the names of three different meds he was currently taking, none of the three meds are prescribed for seizure disorder. The medical department did reach out to grievants pharmacy and current doctor for medical records and for a list of current medications. The list of medications provided by grievants pharmacy went back 3 years and did not contain any seizure medications. The medical record provided by grievants doctor didn't contain any documentation of seizure history. Grievant fails to provide any supporting evidence that he was on any type of seizure medication or that he even advised anyone of such.

This grievance is denied on merit.

(15)

4
SULLIVAN COUNTY SHERIFFS OFFICE

MEMORANDUM

August 14, 2020

To: Delorenzo, Paul 20-0182

From: Corporal Calangelo J

Subject: Grievance 20-473-479 P

Grievant's Complaint:

You state your rights are being violated under Title 28 C.F.R 35.104(I)(1) (2016) Title II of ADA Section 504 and the 8th Amendment by not giving you your medication. You are requesting immediate action to stop these violations and to file claim against the medical staff, the Sheriff and Jail Administration.

Grievance Coordinator's Decision:

Your grievance was returned to you August 10, 2020 by this Coordinator requesting dates of stated violations and names of those individuals you claim violated you and specifically how you were violated. You failed to supply those names to allow me to conduct a thorough investigation.

Medical requests were sent to your doctor and your stated pharmacy for records verification. The facility is unable to provide any medications until such verification is received. Upon receipt of your pharmacy records and medical records, medications are not facility approved. You had an interview with facility psychiatrist at which time you walked out of the interview due to Doctor's unwillingness to provide you with requested medications.

On 08/02/2020 you were started on Kepra for your seizures and then on 08/14/20 you started Buspar prescribed by Dr. Mirza, facility psychiatrist.

Since admission to the facility on July 27, 2020 you have been seen by medical staff at a minimum of twice daily during medication rounds as well as individually six (6) times as well as transported to CRMC twice.

There is no supporting evidence to your claim of medical violating your rights or deliberate indifference.

Grievance DENIED at this level.

If you wish to file any legal papers, you can request such papers by submitting a law library slip.

(16)

(5)

SULLIVAN COUNTY SHERIFFS OFFICE

MEMORANDUM

August 5, 2020

To: Delorenzo, Paul 20-0182

From: Corporal Calangelo

Subject: Grievance 20-462

Grievant's Complaint:

Grievant states he requested to go to rec and was denied due to being on quarantine. He requests to have grievance forwarded to Albany to allow Albany to see how his rights were violated. He also requests to file a 1983 against the Sullivan County Jail.

Grievance Coordinator's Decision:

All inmates entering the Sullivan County Jail are required to go through classification to ensure effective management of all inmates and facility population in a safe and secure environment. Due to the COVID 19 pandemic, classification process now includes a fourteen (14) day quarantine. This is mandatory quarantine per NYSCOC.

Inmates that are unclassified are not entitled to recreation as outlined in the NYSMS 7028.2 (c). Unclassified inmates are permitted out of their cells daily for one (1) hour to use the shower and unit phone to contact loved ones.

Currently the facility is providing more than the NYSMS 7005.5 (b) provide to those inmates housed under NYSMS 7013.2(h)

Grievance denied at this level.

Grievant can request any documentation he would like to file A 1983. A law library request must be made in writing stating what information he would like. Such materials will be provided in three (3) business days after submission of request. He can request a law library request form from his housing unit Officer.

(17)

(5-3)

SULLIVAN COUNTY SHERIFFS OFFICE

MEMORANDUM

September 9, 2020

To: Delorenzo, Paul 20-0182

From: Corporal Calangelo

Subject: Grievance 20-599

Grievant's Complaint:

Grievant claims he has been denied law library for weeks. He states the facility is not in compliance with NYSMS 7031.4. He requests his answer to be forwarded to Albany for review.

Grievance Coordinator's Decision:

The Sullivan County Jail currently provides all legal reference materials outlined in NYSMS 7031.4 through two Lexis Nexus computer systems. These systems are offered to inmate population on a daily basis. Grievant does not support his claim of being denied the right to the law library.

Grievance DENIED at this level.

I Can provide many
cases Not on Lexis Nexus

(18)

(5-2)

SULLIVAN COUNTY SHERIFFS OFFICE

MEMORANDUM

September 9, 2020

To: Delorenzo, Paul 20-0182

From: Corporal Calangelo

Subject: Grievance 20-602

Grievant's Complaint:

Grievant claims he is not allowed an advocate to help him with the grievance process. He claims seeing the facility social worker once a week is not enough and she does not understand the grievance process. He is requesting assistance with grievances and the use of the Lexus Nexus computer system.

Grievance Coordinator's Decision:

Grievant's complaint has been previously answered in grievance 20-541 at the Administrative level. Since entering the facility on July 27, 2020 to date, grievant has submitted over twenty-five grievances and continues to file grievances. Grievant has been able to provide substantial information when requested by grievance coordinator. Grievant has been using the facility law library through access of the Lexus Nexus, as well as received legal documents he personally requested. At no time has grievant submitted a request to a member of Administration requesting assistance as outlined in the NYSMS 7031.3 and 7032.9. Grievant is currently represented by the Legal Aide Council and is not acting in Pro Se Manner.

Grievance DENIED at this level.

Do not have a lawyer
for 42 USC 1983
filed in White Plains federal
Court filed as pro se

(19)

5-1

SULLIVAN COUNTY SHERIFF'S OFFICE

MEMORANDUM

September 11, 2020

To: Delorenzo, Paul 20-0182
From: Lieutenant Christopher R. Bim
Subject: GRIEVANCE 20-570

Grievant states that according to NYSMS and the inmate rule book that current law books will be kept in the multipurpose room. Grievant requests law books to be maintained in the multipurpose room.

Chief Administrative Officer Response:

This facility is currently in compliance with all requirements as outlined in New York State Minimum Standards 7031. The standard does not require this agency to maintain physical law books, it does require this facility to provide access to current legal materials and this standard is being met through the provided Lexis Nexis law computer. A copy of the NYSMS 7031 is being provided with this response. As for the rule book, it is stated on page 3 that the Sheriff or his designee may change or modify the book without notice, in this case it has been modified.

This grievance is denied on merit.

(20)

Evidence

1. Lawsuit About Solitary Confinements and Mentally ill
2. Chief Admin Response Stating I don't Have Seizure meds
3. Jail Won't provide
4. Denied Grievance #20-479
5. Denied Grievance #20-462 States I can request Any documentation for 1983
But Grievance #20-599, 20-602, 20-570 All Denied for requested materials.

INJURIES:

If you were injured as a result of these actions, describe your injuries and what medical treatment, if any, you required and received.

Currently more than 4 Seizures two Hospital visits
In Human and Indifference to my Mental Well being

VI. RELIEF

State briefly what money damages or other relief you want the court to order.

I'd like to be 180,000 for the days I'll got Meds
220,000 for the 11 days I was Confined in A cell without
proper Mental Health, 500,000 for the Pain & Suffering ~~the~~
and Unreparable damage done to me during my tortious
Stay at Sullivan County jail total \$900,000
And for Sullivan County jail to redo Medical/Mental Health
Care System.

(28)

VII. PLAINTIFF'S CERTIFICATION AND WARNINGS

By signing below, I certify to the best of my knowledge, information, and belief that: (1) the complaint is not being presented for an improper purpose (such as to harass, cause unnecessary delay, or needlessly increase the cost of litigation); (2) the claims are supported by existing law or by a nonfrivolous argument to change existing law; (3) the factual contentions have evidentiary support or, if specifically so identified, will likely have evidentiary support after a reasonable opportunity for further investigation or discovery; and (4) the complaint otherwise complies with the requirements of Federal Rule of Civil Procedure 11.

I understand that if I file three or more cases while I am a prisoner that are dismissed as frivolous, malicious, or for failure to state a claim, I may be denied *in forma pauperis* status in future cases.

I also understand that prisoners must exhaust administrative procedures before filing an action in federal court about prison conditions, 42 U.S.C. § 1997e(a), and that my case may be dismissed if I have not exhausted administrative remedies as required.

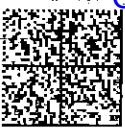
I agree to provide the Clerk's Office with any changes to my address. I understand that my failure to keep a current address on file with the Clerk's Office may result in the dismissal of my case.

Each Plaintiff must sign and date the complaint. Attach additional pages if necessary. If seeking to proceed without prepayment of fees, each plaintiff must also submit an IFP application.

<u>9/26/20</u>	<u>Plaintiff's Signature</u>	
Dated	<u>Paul DeLorena</u>	
<u>Paul</u>	<u>J</u>	<u>DeLorena</u>
First Name	Middle Initial	Last Name
<u>Sullivan County jail 58 Old Rt 17</u>		
Prison Address		
<u>Sullivan</u>	<u>Monticello</u>	<u>NY</u>
County, City	State	Zip Code
<u>12701</u>		

Date on which I am delivering this complaint to prison authorities for mailing:

9/27/20



D. Delescenzo 20 - 200182 005772
Dutchess County Jail
58 Old RT 17
Monticello, NY 12761

United States Federal Court
Federal Building
Prose to take until Clerk
300 Quasseroes St
White Plains, NY 10601

SEP 24 2020
Clerk D.C.
W.P.

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